



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 1258.01-6172US
In re Application of Borgmeier et al.		
Application Number 10/694,627	Filed October 27, 2003	
For APPARATUS FOR NONINVASIVELY MEASURING HEMATOCRIT AND ASSOCIATED METHODS		
Group Art Unit 3739	Examiner L. Cohen	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☒ One month (37 CFR 1.17(a)(1)) \$120.00
 - ☐ Two months (37 CFR 1.17(a)(2)) \$ _____
 - ☐ Three months (37 CFR 1.17(a)(3)) \$ _____
 - ☐ Four months (37 CFR 1.17(a)(4)) \$ _____
 - ☐ Five months (37 CFR 1.17(a)(5)) \$ _____
 - ☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 60.00.
 - ☒ A check in the amount of the fee is enclosed.
 - ☐ Payment by credit card. Form PTO-2038 is attached.
 - ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
 - ☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1469.
- I have enclosed a duplicate copy of this sheet.

- I am the ☐ applicant/inventor.
- ☐ assignee of record of the entire interest. See 37 CFR 3.71
- Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ attorney or agent of record.
- ☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a).

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

March 13, 2006

03/17/2006 EAYALW1 00000011 10694622 Date
01 FC:2251 60.00 DP

Signature
Brick G. Power Reg. No. 38,581
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

<input type="checkbox"/> *Total of _____ forms are submitted.	
CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name: Erika Gandre	Date: March 13, 2006
Signature	